

Health Home Quality Improvement Workgroup - 2/16/2022

Participants

Pamela Lester IME	Heidi Weaver IME	LeAnn Moskowitz IME
Tami Lichtenberg IME	David Klinkenborg AGP	Sara Hackbart AGP
Tori Reicherts ITC	Bill Ocker ITC	Flora Schmidt IBHA
Susan Seehase IACP	Kristi Oliver Children's Coalition	Paula Motsinger IME
Stacy Nelson Waubonsie	Amy May Waubonsie	Geri Derner YSS
Jen Cross Orchard Place	Kim Keleher Plains	Andrea Lietz Plains
Melissa Ahrens CSA	Christina Smith CSA	Faith Houseman Hillcrest
Ashley Deason Tanager	Stephanie Millard First Resources	Kristine Karminski Abbe
Shawna Kalous Plains	Rich Whitaker Vera French	Jamie Nowlin Vera French
Crystal Hall Tanager		

Notes

Last meeting Notes:

- Previous action item: Pam to send out Workgroup Plan (Completed)
- No questions/concerns from group

Draft Workgroup Report:

- Reviewed the document
- At our last meeting you will have time to review and provide feedback before submitting the report to IME Leadership. Please send feedback and/or changes anytime to the Health Home email box. Pam will capture and share at the next meeting.
- Comments: Glad we are building it as we go. Document/process for updating looks good.

Workgroup Timeline:

- Will update as needed as we go
- Added recommendations from last week
- IAC moved to March 2
- No concerns from group

Population Criteria:

- This is one of the biggest changes (slide 12, SMI/SED documented by a LMHP) from the 2016 SPA
- Kristine Karminski Abbe: When working with a vast number of MHPs can be challenging. Find themselves chasing down documentation, resending documentation, MHP refusing to fill out document. This is a barrier for HH members and burden to the HHs. This significant change has been the biggest change and the biggest challenge. Obtaining information, records etc. from the LMPH. There is a shortage of LMPHs as well. We spend a significant amount of time chasing documentation to enroll a member. This creates a barrier to access and a burden to the IHH Provider. Had to let members know they can't participate because they cannot get documentation. Have to draw the line someplace.
- **Geri Derner YSS:** when working with an internal referral, not an issue, it's the external referrals that is a challenge. May have to request 5, 6, 7 times. Feel like have burned some bridges. Give them a list of why the documentation is needed, but they still don't want to release the documentation. Don't disagree the need but didn't anticipate the hurdle to get this information. Obstacle have to turn away members. Internal LMPH is not the issue, but it is for those folks that see a LMPH outside our community. alarmed at the number of times we ask an external MHP for an assessment and they don't have one. LeAnn agrees (as we dig into the issues, we will find there are opportunities to for training, etc).
- **Faith Houseman Hillcrest:** I agree completely with Kristine and Geri....it truly delays services for some individuals. We also struggle getting the documentation from outside agencies.
- **Melissa Ahrens CSA:** I agree as well. We do a lot of "chasing" to get the documentation we need and have to request numerous times. We have had to enlist the help of the member and/or family to obtain what we need on several occasions. This feels burdensome to members/families as well.
- **Christina Smith CSA:** This requirement creates bottlenecks in getting members enrolled. not getting documentation is not the only issue (staffing shortages, etc).
- **LeAnn Moskowitz IME:** Could the member obtain that information as they should be allowed access to their information. Agrees that LMHPs not having an assessment is an issue.

Enrollment of Participants:

- Geri Derner CSA: Agree that opt-in is better as it member's choice. Maybe this
 is a parking lot topic, but it would be great to have a list of members from the
 MCO/State to reach out and engage in the Health Home Program. Pam: We
 could have this on the agenda for the Director FTF meeting in May. Folks
 agreed.
- **Kristine Karminski Abbe:** Providers only think of us during a crisis, and we would like referrals before they are in a crisis.
- Faith Houseman Hillcrest: Could we add the enrollment process when transferring IHHs? process of transferring from one IHH to another is clunky. Do have direct communication with the previous IHH and still run into problems. Bill

- Ocker ITC: We have looked into this and most of the time it is a lack of communication between IHHs. Pam: Yes, we can add.
- Pam: Parking lot items to be moved to the May Quarterly Directors meeting agenda - group agrees with this

Health Home Team:

- Kristine Karminski Abbe: Does it make sense to reference the IAC that it ties
 to? Requirement for the HH program doesn't line up with HAB and maybe CMH
 waiver. Have run into challenges with Peer support training because it is limiting
 at times.
- Pam: Met with the U of I to talk through concerns on this. They are looking at expanding the training. Maybe can pull the DHS contact into conversations (LeAnn agrees). Also noticed some children 16, 17 and 18 yrs. old and how valuable a Peer Support Specialist would be (same with the adult, maybe at times a Family Peer Support would be helpful).
- **Kristine Karminski:** Challenge with 18-year-olds as they cannot take Peer Support training.
- Christina Smith CSA: I like the concept. Powerful for the age group to see who
 has come through it. Perhaps offer virtual option.
- Jenn Cross Orchard Place: I think that is great to add
- Melissa Ahrens CSA: My mic isn't working but think that would be very helpful.
 In addition--having training offerings in the evening or weekends would
 accommodate others. The training times have been a barrier with some who
 were in college.
- **Kim Keleher:** Please clarify "ensure a personal provider for each member". Does that include psychiatrist? The language is a little confusing. (Slide 28) Pam, yes if the member needs one (Primary Care Provider). Need to be sure that it is clear in the SPA.
- Pam: Will correct slide 21 and 31 before sending minutes out.

Health Home Payment Methodologies:

No comments from the group.

Health Home Provider Supports:

• **Kim Keleher Plains:** We don't currently get claims data. Pam: MCOs have a portal with individual member's claims information. Sara Hackbart AGP: We have several reports such as inpatient report which is daily (You will only get one if you have a member that is impatient), Report Cards for your incentive program, and Gap in Care Report.

Health Home Service Comprehensive Care Management:

 Faith Houseman Hillcrest: I have a question about the licensed healthcare professional for the assessment and care plan......does the IHH Nurse Care Manager meet the criteria?

Next Meeting:

- Please provide any feedback to the Health Home email box that you think we need to do a deeper dive on.
- Finish reviewing Health Home Services
- Review Survey/Listening Sessions/Site Visit Report Pam will get survey results out so you can take a look at it. Had challenges with stratifying your staffing, data didn't clearly show how you do it. Maybe through brainstorming we can figure something out.
 - Geri: had some challenges with answering some of the survey questions.
 Hard to capture. So much room for interpretation.
- Review Draft Iowa Administrative Rule